

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See *"Instructions for Service of Process by U.S. Marshal"*

PLAINTIFF Dougie Lester	COURT CASE NUMBER 5:17-cv-00740
DEFENDANT Pay Car Mining, Inc., Bluestone Coal Corp., Bluestone Industries, Inc., Keystone Service Indust	TYPE OF PROCESS Personal service or certified mail

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
John Hussell, Esq. (attorney for Defendants; authorized to accept service of process)

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

300 Summers Street, Suite 1230 P.O. Box 3971 Charleston, WV 25339

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Samuel B. Petsonk, Esq.
Mountain State Justice, Inc.
223 Prince Street
Beckley, WV 25801

Number of process to be
served with this Form 285 5

Number of parties to be
served in this case 5

Check for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

John Hussell contact information --- Office: (304) 345-9455; Fax: (304) 345-4607 john.hussell@wwdhe.com

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF

☐ DEFENDANT

TELEPHONE NUMBER

(681) 207-7510

DATE

4/24/2019

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
---	------------------------	---------------------------------	--------------------------------	--	------

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served (*if not shown above*)

Date

Time

☐ am

☐ pm

Address (*complete only different than shown above*)

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
_____	_____	_____	_____	_____	_____

REMARKS